

**MAINE DEPT OF
PUBLIC SAFETY**

STATE OF MAINE
Liquor Licensing & Inspection Division
8 State House Station
Augusta ME 04333-0008
Tel: (207) 624-7220 Fax: (207) 287-3434



APPLICATION FOR B.Y.O.B. FUNCTION
\$10.00 (Per Day)
Check Payable: Treasurer State of Maine

Name of Applicant _____

Address _____ Town/City: _____ State: _____

Telephone (Day) _____ Fax: _____

If Organization, name of person responsible: _____

Birth of Date of Applicant(s): _____

Location of Function: _____

Address: _____ City/Town: _____

Describe specific area to be licensed: _____

Date of Function: _____ Time – From: _____ To: _____

Number of Persons attending: _____

Signature of Person Responsible

Date

Print Name of Person Responsible

**FOR USE ONLY BY DEPT. OF PUBLIC SAFETY – LIQUOR LICENSING
RESTRICTIONS:**

[] **APPROVED – PERMIT** # _____

DATED: _____

[] **NOT APPROVED**

ISSUED BY: _____

This permit is not assignable and is valid for use only by the applicant named heron for the date, time, and location indicated heron. This permit is issued subject to the Laws, Rules and Regulations of the Division and is issued subject to the penalties as provided for in Title 28A, Chapter 33.

NOTE:

MUNICIPAL OFFICERS & COUNTY COMMISSIONERS:

This application must be approved by the Municipal Officers of the municipality in which the function is to be held or, if held in an unincorporated place, by the County Commissioner. Title 28A, Section 1076, Subsection 7D grant authority for this approval without public notice.

STATE OF MAINE

Dated at: _____, Maine _____ SS
City/Town (County)

On: _____
Date

The undersigned being: ف Municipal Offices ف County Commissioners of
the

 ف City ف Town ف Plantation ف Unincorporated Place of: _____,
Maine

Hereby certify that we have given public notice on this application and held public hearing thereon as required by Section 653 Title 28A, Maine Revised Statutes and herby approve said application.

Signature	Print

***72 Hours in Advance of Said Event or Gathering
REQUESTED***